

Charles A. But
Paralegal Specialist

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM 10-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2				1		
3				1		
4				1		
5				1		
6				1		
7				1		
8	1		1			
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50						
TOTAL IND.	2		2			
TOTAL DEP.	6		6			
TOTAL CLAIMS	8		8			

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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